



RECEIVED
CENTRAL FAX CENTER

MAY 09 2005

FACSIMILE MESSAGE**IMPORTANT CONFIDENTIALITY NOTICE**

The documents included in this facsimile transmission from the law firm of Reinhart Boerner Van Deuren s.c. contain information which may be confidential or legally privileged. These documents are intended only for the use of the individuals or entities named on this transmission cover sheet. If you or your firm are not the intended recipient and have received this transmission mistakenly, you are hereby notified that reading, copying, disclosing or distributing these documents, or taking any action based on the information contained within them, is strictly prohibited, and that the documents should be returned to this firm immediately. If you have received this facsimile in error, please notify us by calling 414-298-8549 immediately so that we can arrange to retrieve the transmitted documents at no cost to you.

PLEASE DELIVER THE FOLLOWING TO:

Memory Tag: 2# 632

Name:	U.S. Patent Office	Facsimile No.	1-703-872-9306
Company:	Commissioner for Patents	Phone No.	

FROM: Linda Gabriel-Kasulke, Docket Coordinator
DATE: April 13, 2005

REQUESTED BY	L. Gabriel-Kasulke	ATTORNEY NO.	770
EXTENSION	8271	CLIENT NO.	070291
		MATTER NO.	0178
		DOCKET NO.	8696

Total number of pages sent, including this page

IF ANY PROBLEMS OCCUR WITH THIS TRANSMISSION OR IF YOU HAVE NOT RECEIVED ALL THE PAGES, PLEASE CALL OUR
FACSIMILE OPERATOR AT 414-298-8549.

COMMENTS:

SECOND NOTICE

**PLEASE FAX AUTOREPLY
FACSIMILE TO: 414-298-8097**

5/9/05

THANK YOU

We have not
received the
acceptance of
the power.
Thank you.

Please type a plus sign (+) inside this box → PTO/SB/21 (08-00)
Approved for use through 10/31/2002. OMB 0651-0031U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.**TRANSMITTAL
FORM***(to be used for all correspondence after initial filing)*

Application Number	10/668,672
Issue Date	09/23/2003
First Named Inventor	Samuel I. Stupp
Group Art Unit	1645
Examiner Name	
Total Number of Pages in This Submission	4
Attorney Docket Number	8696

RECEIVED**CENTRAL FAX CENTER****MAY 09 2005****ENCLOSURES (check all that apply)**

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i>	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i>
<input type="checkbox"/> Alter Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input checked="" type="checkbox"/> Power of Attorney or Authorization of Agent	<input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i>
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Revocation of Power of Attorney or Authorization of Agent
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	Statement Under 37CFR 3.73(b)
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Antonia M. Holland Reinhart Boerner Van Deuren s.c.	
Signature	<i>Antonia M. Holland</i>	
Date	4-13-05	

CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being transmitted to the United States Patent and Trademark Office via facsimile to (703) 872-9306: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: April 13, 2005

Typed or printed name	Linda Gabriel-Kasulke		
Signature	<i>Linda Gabriel-Kasulke</i>	Date	Apr 13, 2005

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231. 1126258

MAY 09 2005

Please type a plus sign (+) inside this box → +

PTO/SB/81 (10-00)

Approved for use through 10/31/2002. OMB 0160-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT

Application Number	10/668,672
Application Date	09/23/2003
First Named Inventor	Samuel I. Stupp
Group Art Unit	1645
Examiner Name	
Attorney Docket Number	8696

I hereby appoint:

Practitioners at Customer Number
OR
 Practitioner(s) named below:

22922

PATENT TRADEMARK OFFICE

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number.

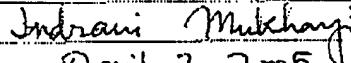
OR

<input type="checkbox"/> Firm or Individual Name			
Address			
Address			
City	State	ZIP	
Country			
Telephone	Fax		

I am the:

Applicant.
 Assignee of record of the entire interest. See 37 CFR 3.71.
Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Indrani Mukharji, Executive Director, Technology Transfer Program on behalf of Applicant, Northwestern University		
Signature			
Date	April 7, 2005		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.
Submit multiple forms if more than one signature is required, see below.

*Total of 3 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231. 1126258

MAY 09 2005

Please type a plus sign (+) inside this box →

PTO/SB/02 (10-00)

Approved for use through 10/31/2002 OMB 0651-0035

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REVOCATION OF POWER OF
ATTORNEY OR
AUTHORIZATION OF AGENT

Application Number	10/668,672
Application Date	09/23/2003
First Named Inventor	Samuel I. Stupp
Group Art Unit	1645
Examiner Name	
Attorney Docket Number	8696

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

A Power of Attorney or Authorization of Agent is submitted herewith.

OR

Please change the correspondence address for the above-identified application to:

Customer Number →

OR

<input type="checkbox"/> Firm or Individual Name			
Address			
Address			
City			
Country	State	ZIP	
Telephone	Fax		

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Indrani Mukharji, Executive Director, Technology Transfer Program on behalf of Applicant, Northwestern University
Signature	<i>Indrani Mukharji</i>
Date	April 7, 2005

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representatives are required.
Submit multiple forms if more than one signature is required, see below.

Total of 3 forms are submitted.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231. 1126250

STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: Northwestern University

Application No./Patent No.: 10/668,672 Filed/Issue Date: 09/23/2003

Entitled: Self-Assembled Peptide-An amphiphiles & Self-Assembled Peptide Nanofiber Networks: Presenting Multiple Signals

Northwestern University a University

(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)
states that it is:

1. the assignee of the entire right, title, and interest; or
2. an assignee of less than the entire right, title and interest.

The extent (by percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

A. An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

OR

B. A chain of title from the inventor(s) of the patent application/patent identified above, to the current assignee as shown below:1. From: Samuel I. Stupp
Krista L. Nicce
Jeffrey D. Hartgerink
To: Northwestern University

The document was recorded in the United States Patent and Trademark Office at Reel 015806, Frame 0689, or for which a copy thereof is attached.

2. From: Research Corporation Technologies, Inc. To: University of Massachusetts
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached. Additional documents in the chain of title are listed on a supplemental sheet. Copies of assignments or other documents in the chain of title are attached.**[NOTE:** A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.8]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

April 7, 2005

Date

Indrani Mukherji

Signature

Indrani Mukherji, Executive Director

Typed or printed name

Technology Transfer Program on behalf of
Applicant, Northwestern University

Title

This collection of information is required by 37 CFR 3.73(b). This information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1.2 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you require to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231. 1125030